Case 25-11938-amc Doc 4 Filed 05/15/25 Entered 05/15/25 16:29:35 Desc Main Document Page 1 of 3

Fill in this information to identify your case:						
Debtor 1	Beverly		Knight			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the:	Easte	ern District of Pennsylvania			
Case number (if known)						

Check as directed in lines 17 and 21:	
According to the calculations required Statement:	by this
1. Disposable income is not determ under 11 U.S.C. § 1325(b)(3).	ined
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).	i
☑ 3. The commitment period is 3 year	s.
☐4. The commitment period is 5 year	s.
Check if this is an amended filing	

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: Calculate Your Average Monthly Income							
1.	1. What is your marital and filing status? Check one only. ✓ Not married. Fill out Column A, lines 2-11. ✓ Married. Fill out both Columns A and B, lines 2-11.							
10 va ex	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.							
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
 Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 					\$0.00			
3.	3. Alimony and maintenance payments. Do not include payments from a spouse.				\$0.00			
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.								
5.	Net income from operating a business, profession, or							
	farm	Debtor 1 \$0.00	Debtor 2 \$0.00					
	Gross receipts (before all deductions)	\$0.00 -	\$0.00					
	Ordinary and necessary operating expenses	\$0.00		Conv				
	Net monthly income from a business, profession, or farm		\$0.00	Copy here –	\$0.00			
6.	Net income from rental and other real property	Debtor 1	Debtor 2					
	Gross receipts (before all deductions)	\$0.00	\$0.00					
	Ordinary and necessary operating expenses	\$0.00	\$0.00					
	Net monthly income from rental or other real property	\$0.00	70.00	Copy	\$0.00			

Debtor 1	Beverly		Knight Case number (if known)					
	First Name	Middle Name	Last Name		•			
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
7. Interest, c	dividends, and royalt	ies			\$	0.00		_
8. Unemploy	yment compensation	1			\$2,27	9.33		
Do not en	ter the amount if you	contend that the amou	ınt received was a benef	it under				
the Social	Security Act. Instead	d, list it here:	·······					
For yo	ou		·····	\$0.00				
For yo	our spouse							
under the include ar States Go death of a under cha exceed th under any	Social Security Act. Any compensation, per overnment in connect member of the unifor apter 61 of title 10, the eamount of retired per provision of title 10 of from all other source de any benefits received.	Also, except as stated asion, pay, annuity, or a ion with a disability, courmed services. If you ren include that pay only ay to which you would other than chapter 61 ces not listed above. Speed under the Social S	ecify the source and am ecurity Act; payments re	not nited sability, or paid s not etired ount. Do ceived as	\$	<u>0.00</u>		
terrorism States G death of	; or compensation, povernment in connection	ension, pay, annuity, o ction with a disability, co ormed services. If nec	international or domesting allowance paid by the Upmbat-related injury or disessary, list other sources	Jnited isability, or				_
Total amo	unts from separate p	ages if any						_
					\$2,279	3 33	T	= \$2,279.33
		monthly income. Add r Column A to the total	lines 2 through 10 for ea for Column B.	ich	ΨΖ,ΖΙ	3.33	+	Total average monthly income
Part 2: Det	ermine How to M	leasure Your Dedu	ctions from Income					cyccc
40. 0		debeter over form the	44					*
12. Copy yo	ur totai average mor	itnly income from line	11					\$2,279.33
_	e the marital adjustn							
	not married. Fill in 0							
		ouse is filing with you.						
		ouse is not filing with y						
	pendents, such as pa		lumn B, that was NOT re tax liability or the spouse	0 , 1		•	,	
	specify the basis for earliant adjustments on a		and the amount of incom	e devoted to e	each purpose. If	necessar	y, list	
If this ac	djustment does not a	pply, enter 0 below.						
				+				
Total					\$0.00	Copy he	ere. →	\$0.00
14. Your cur	rent monthly income	e. Subtract the total in I	ine 13 from line 12.	,				\$2,279.33

Debtor 1	Beverly		Knight	Case number (if known)	
	First Name	Middle Name	Last Name		
	-	hly income for the year.			40.000.00
	• •				\$2,279.33
Mu	Itiply line 15a by 12 (the number of months in	a year).		x 12
15b. Th	ne result is your curre	ent monthly income for th	e year for this part of the	e form	\$27,351.96
16. Calculat	e the median family	income that applies to	you. Follow these steps:		
16a. Fil	Il in the state in which	n you live.	<u>Penr</u>	nsylvania_	
16b. Fil	I in the number of pe	ople in your household.		3	
16c. Fil	I in the median family	y income for your state a	nd size of household		\$103,856.00
			nts, go online using the livailable at the bankruptcy	ink specified in the separate	
17. How do	the lines compare?				
17a.	Line 15b is less th <i>U.S.C.</i> § 1325(b)(nan or equal to line 16c.	On the top of page 1 of t T fill out <i>Calculation of Y</i>	his form, check box 1, <i>Disposable income is not deterour Disposable Income</i> (Official Form 122C–2).	rmined under 11
17b. 「	Line 15b is more to 1325(b)(3). Go to	than line 16c. On the top	o of page 1 of this form, o	check box 2, Disposable income is determined under the le Income (Official Form 122C-2). On line 39 of that	
Part 3: Cal	Iculate Your Com	mitment Period Und	der 11 U.S.C. §1325(b)(4)	
18. Copy yo	our total average mo	nthly income from line			\$2,279.33
calculati amount	ng the commitment p from line 13.	period under 11 U.S.C. §	1325(b)(4) allows you to	s not filing with you, and you contend that deduct part of your spouse's income, copy the	
19a. If the	e marital adjustment o	does not apply, fill in 0 o	n line 19a		\$0.00
19b. Sub	tract line 19a from lir	ne 18.			\$2,279.33
20. Calculat	e your current mont	hly income for the year.	Follow these steps.		
20a. Copy	line 19b				\$2,279.33
Multip	ply by 12 (the numbe	r of months in a year).			x 12
20b. The r	esult is your current r	monthly income for the y	ear for this part of the fo	rm.	\$27,351.96
20c Copy	the median family in	come for your state and	eize of household from I	ne 16c	\$103,856.00
	•	come for your state and	Size of flousefloid from it	110 100.	
☑ Line 2	the lines compare? Ob is less than line 20	Oc. Unless otherwise ord	dered by the court, on the	e top of page 1 of this form, check box 3,	
Line 2	0b is more than or ed	3 years. Go to Part 4. qual to line 20c. Unless of the period is 5 years. Go		court, on the top of page 1 of this form,	
Part 4: Sig	n Below				
By signin	a here under nenalty	of perium I declare that	the information on this	statement and in any attachments is true and correct.	
by signing	g nere, under penany	or perjury i declare that	the information on this s	statement and in any attachments is true and correct.	
X <u>/</u>	s/ Beverly Knight				
Si	gnature of Debtor 1				
Da	ate 05/15/2025				
-		ll out or file Form 122C– m 122C–2 and file it with		that form, copy your current monthly income from line	e 14 above.